



**Edina Fire Department**  
6250 Tracy Avenue  
Edina, Minnesota 55436-2580  
(952) 826-0330  
Fax (952) 826-0393

City of Edina



# **FIRE – CONSTRUCTION PERMIT APPLICATION**

Permit # \_\_\_\_\_

Permits as authorized by 2007 Minnesota State Fire Code Section 105.7

NOTE: Please print or type, sign and return this permit application along with a check made payable to "City of Edina" to the Edina Fire Department.

**SITE ADDRESS** \_\_\_\_\_ **SUITE/UNIT #** \_\_\_\_\_

**TENANT/BUILDING NAME** \_\_\_\_\_

**SITE CONTACT NAME** \_\_\_\_\_ **PHONE** \_\_\_\_\_

**NAME OF BUSINESS / CONTRACTOR** \_\_\_\_\_

**BUSINESS ADDRESS** \_\_\_\_\_ **PHONE** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIPCODE** \_\_\_\_\_ **FAX** \_\_\_\_\_

**PROJECT MANAGER** \_\_\_\_\_ **PHONE** \_\_\_\_\_ **CELL** \_\_\_\_\_

**EMAIL ADDRESS** \_\_\_\_\_

A permit is required for the installation, modification, repair, construction, alteration, removal, abandonment, or disposal of any of the following:

|  |   |  |
|--|---|--|
| <input type="checkbox"/> Battery Systems, > 50 gal.  | <input type="checkbox"/> Flammable / Combustible Liquids  | <b>Tanks:</b>  |
| <input type="checkbox"/> Compressed Gases, Flammable | <input type="checkbox"/> Fuel Dispensing Station          | <b>Size</b> _____  |
| Per 2007 MSFC Table 105.6.8                          | <input type="checkbox"/> Industrial Ovens                 |  |
| List quantities and provide MSDS's for each          | <input type="checkbox"/> LP Gas System                    | <b>Quantity</b> _____  |
| <input type="checkbox"/> Hazardous Materials         | <input type="checkbox"/> Spray Booth/Room or Dipping Tank | <input type="checkbox"/> Install <input type="checkbox"/> Remove           |
| Per MSFC Table 105.6.20                              | <input type="checkbox"/> Other:                           | <input type="checkbox"/> Above Ground <input type="checkbox"/> Underground |
| List quantities and provide MSDS's for each          |   |  |

**DESCRIPTION OF WORK TO BE DONE** \_\_\_\_\_

**ANTICIPATED START AND END DATE** \_\_\_\_\_

**PERMIT FEE IS BASED ON VALUATION** For Permit Fee call the Fire Prevention Bureau at (952) 826-0339

**VALUATION** \$ \_\_\_\_\_  
(Based on job costs; rental fees, materials and labor charges)

**PERMIT FEE** = \$ \_\_\_\_\_

**PLAN REVIEW FEE** = \$ \_\_\_\_\_

**TOTAL PERMIT COST** = \$ \_\_\_\_\_

**\* Non Business Hours Inspections are \$100.00 per hour with a minimum 1 hour fee.**  
**Normal Business Hours are Monday – Friday 7:00 am to 4:00 pm.**

- All information given above is complete and accurate.
- All work shall comply with the Edina City Code and the Minnesota State Fire Code.
- I understand that this is an application only, not a permit. Work shall not start without an approved permit. Work started without approval shall be subject to an investigation fee equal to the permit fee.
- All work shall be done according to plans approved by the City of Edina when approved plans are required. Please provide two sets of completed plans and equipment specification sheets with this application.

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Reviewed by Inspector** \_\_\_\_\_ **Date** \_\_\_\_\_ **Received by** \_\_\_\_\_ **Date** \_\_\_\_\_